Effer October 1, 2000 09/762991												1
				LED - PART I Column 1) (Column 2)					NTITY	OR	OTHER	THAN
TOTAL CLAIMS					4			RATE	FEE	7	RATE	FEE
FC	OR .	NUMBER FILED		NUMBER EXTRA			BASIC FE	E	OR	BASIC FEE		
TO	OTAL CHARGE	2/minus 20=		. ,			XS 9=	<del>                                     </del>	┨¨¨	<b>Y</b> 242		
INI	DEPENDENT C	7 minus 3 =		•				<del> </del>	OR	XS18=	18	
MULTIPLE DEPENDENT CLAIM PRESENT								X40=	ļ	OR	X80=	
<u> </u>								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL	1	OR	TOTAL	118	
CLAIMS AS AMENDED - PART II										3	OTHER	
_	(Column 1) (Column 2) (Column 3							SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	ili. Ve	REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž	Total	.16	Minus	. 2	0	=		X\$ 9=		OR	X\$18=	
AME	Independent	NTATION OF MU	Minus		3	=		X40=		OR	X80=	
Ш	rinsi Prese	MINION OF MU	LTIPLE DEI	PENDENI	CLAIM	. [ ]	I	+135=		OR	+270=	
								TOTAL			TOTAL	
	Δ	(Column 1)		(Colum	in 2)	(Column 3)	A	DOIT. FEE		, ,	VDDIT. FEE	
8		CLAIMS REMAINING AFTER AMENDMENT	14.9	HIGHE	ST ER USLY	PRESENT EXTRA		RATE	ADDI-	-] [		ADDI-
				PREVIOU PAID F					TIONAL FEE		RATE	TIONAL FEE
AMENDMENT	Total	•	Minus	••		= '	Γ	X\$ 9=		OR	X\$18=	
AME	Independent		Minus	•••		=	Ī	X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Ħ	405				
							L	+135= TOTAL		OR	+270=	
							A	DOIT. FEE		OR,	DOIT. FEE	·
	reference a constant	(Column 1) CLAIMS I		(Colum		(Column 3)	_	·		_		
S .	ti <b>ng</b> Sillys I	REMAINING AFTER		NUMBI PREVIOU	JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
AMENDMENT	Total	AMENDMENT	Minus	PAID F	UH		-		FEE	H		FEE
	Independent		Minus	•••		=		X\$ 9=		OR	X\$18=	
₹	1	NTATION OF MU			CLAIM			X40=		OR	X80=	
							Γ	+135=		OR	+270=	
		nn 1 is less than the nber Previously Pai					<u> </u>	TOTAL		OB L	TOTAL	
****	the Highest Nur	nber Previously Paid ber Previously Paid	d For IN THI	S SPACE is	less that	3. enter "3."		OOIT. FEE <b>L</b> d in the app		- 4	DDIT. FEE <b>l</b> IMN 1,	

FORM PTO-875 (Rev: 8/00)

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